

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND
1							51		
2		1					52		
3		1					53		
4		1					54		
5		1					55		
6		5					56		
7		5					57		
8		5					58		
9	1						59		
10	1						60		
11		2					61		
12		2					62		
13		2					63		
14		2					64		
15		2					65		
16		2					66		
17		2					67		
18		2					68		
19		2					69		
20		2					70		
21		2					71		
22		2					72		
23		2					73		
24		2					74		
25		2					75		
26		2					76		
27		2					77		
28		2					78		
29		2					79		
30		2					80		
31		2					81		
32		2					82		
33		2					83		
34		1					84		
35		1					85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	3						TOTAL IND.		
TOTAL DEP.	67		←	←	←		TOTAL DEP.	←	←
TOTAL CLAIMS	70		██████████	██████████	██████████		TOTAL CLAIMS	██████████	██████████